

PTO/SB/21 (02-04)

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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	09/858,723
	Filing Date	September 17, 2001
	First Named Inventor	Kramer, M.
	Art Unit	Kosson, R.
	Examiner Name	1638
Total Number of Pages in This Submission	Attorney Docket Number	9725-6

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Akerman Senterfitt/Nicholas Zachariades, Reg. No. 56,712 P.O. Box 3188 West Palm Beach FL 33402-3188		
Signature	<i>N. Zachariades</i>		
Date	May 12, 2006		

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Typed or printed name	Nicholas A. Zachariades, Reg. No. 56,712		
Signature	<i>N. Zachariades</i>	Date	May 12, 2006

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PTO/SB/17 (12-04)
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Effective on 12/08/2004 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known Application Number 09/856,723 Filing Date SEPTEMBER 17, 2001 First Named Inventor KRAMER, M. Examiner Name KOSSON, R. Art Unit 1638 Attorney Docket No. 9725-6	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		RECEIVED CENTRAL FAX CENTER MAY 12 2006	
TOTAL AMOUNT OF PAYMENT (\$) 60.00			

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: 50-0951 Deposit Account Name: Akerman Senterfitt
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
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FEE CALCULATION

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

Fee Description	Small Entity	
	Fee (\$)	Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fees Paid (\$)	Multiple Dependent Claims	
				Fee (\$)	Fees Paid (\$)
HP = highest number of total claims paid for, if greater than 20 - 20 or HP = _____ x _____ = _____ Indep. Claims Extra Claims Fee (\$)					
HP = highest number of independent claims paid for, if greater than 3 - 3 or HP = _____ x _____ = _____ Fee Paid (\$)					

3. APPLICATION SIZE FEE
 If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fees Paid (\$)
- 100 = 0	/ 50 =	(round up to a whole number) x		

4. OTHER FEE(S)
 Non-English Specification, \$130 fee (no small entity discount)
 Other: One Month Extension of Time 60.00

SUBMITTED BY		Registration No. 56,712	Telephone (561) 653-5000
Signature		(Attorney/Agent)	Date May 12, 2006
Name (Print/Type) Nicholas A. Zachanades			

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
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